聞MoDNR

COMBINED NOTIFICATION OF HAZARDOUS WASTE ACTIVITY Send to: Missouri Department of Natural Resources, WasteManagement Program, P.O. Box 176, Jefferson City, MO 65102

For Official Use Only						_	******					•	•					
	,	Com	ments							IJá!	40		% !!					
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Installation's EPA ID Number				ppro	ved		yr.	ete A <i>n</i>	ecei 70.		lay)]``	ı. J	1000	, Č	95		
FMOD981724289	J/A	C 1				8	8	<u>(</u>	10	Ö	3	DEC E SM	ANA GRA	ENT	FATC	KSO		
I. Name of Installation									Ť	•						15.		
RAINBOW METAL		F	j	N	7	۶	K	j	N	G								
II. Installation Mailing Address																		
C	Stre	et or	P.O	. Box									_					
33000 Little	R	L	v	e		E	X	P	R	9	5	5	yγ	AL	,			
City or Town					L						-	tate			Code			
INDEPENDENCE											m	<i>(</i> 2	6		05			
III. Location of Installation											1 1		C.					
	treet	or Ro	oute (Numl	ber		:											
5 3000 Little	B	2	C	e		E	X	P	R	e	٤	2	W	AY				
City or Town								•			St	ate		ZIP	Code			
6 INDEPENDENCE						1					M	0	6) 5	7		
IV. Installation Contact																		
Name and Title (last, first, and job	title						•• , . • •	•	Pho	ne Nu	ımbe	r (are	s code	and	numb	er)		
2 RUHL MARK								8	.1	6	3	7	3	2	7 2	0		
V. Ownership																		
A. Name of Installation's Lec	ame of Installation's Legal Owner B. Type of Ownership (enter c								odej									
RONALD J MAG		A	7 R D 1 P															
VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)																		
A. Hazardous Waste Activity B. Used Oil Fuel Activities 1 a. Generator 2. Transporter A. Hazardous Waste Activity B. Used Oil Fuel Activities 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)																		
In Senerator In Less than 1,000 kg/	mo.		Ц	6. O	ff-Sp <i>inter</i>	ecific 'X' an	ation Id ma	Use: rk ap	d Oil <i>pro</i> c	Fuel <i>Viate</i>	boxe	s bel	'ow)					
3. Treater/Storer/Disposer		l																
3. Treater/Storer/Disposer 4. Underground Injection b. Other Marketer																		
5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)					C. Burner													
a. Generator Marketing to Burner 7. Specification Used Oil Fuel Marketer (or On site Burner)																		
b. Other Marketer Who First Claims the Oil Meets the Specification																		
c. Burner		\perp		_														
VII. Waste Fuel Burning: Type of Combustion Dev	ice/	enter	r'X' /	n all i	еррго	priet	e box	95 (0	indie	ate t	ype o	f com	busti	on dev	ice(s)	in		
	Indus	u. 00	- III	iu uci	uon s	ior o	HHILL	ons (or co	mous	STION	devic	:es.)					
VIII. Mode of Transportation (transporters only —	ente	er 'X	" in	the	anni	one	iete	hav	G. In	austr	iai F	urnac	e					
☐ A Air ☐ B. Rail 💢 C. Highway 🔲 D. Water 🔲 E. Other (specify)							63(2)											
X. First or Subsequent Notification																		
Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hezardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.						11												
M							,											
A. First Notification	piete	it e m	C)					4 III BIRDI	1456 	51 #####								
PA FORM 8700-12/MONE HUC 1/David of English																		

12/HUNK HWG-1(Revised 7-87)



18 on reverse

	ID - For Official Use Only					
	-C.					
X. Description of Hazardous Wastes (contin	ued from front)					
A. Vestes from Honspecific Sources (F-List). Enter the four-digit	number from 40 CFR Part 261.31 for each listed hazardous waste					
from nonspecific sources your installation handles. Below each number	er,enter monthly generation amount in pounds and frequency code 8 9 or					
WASTE ID #						
AMOUNT AND STREET TO THE STREE	lbs. lbs. lbs.					
B. Wastes from Specific Sources (K-List). Enter the four-digit r	unber from 40 CFR Part 261.32 for each listed hazardous waste from					
specific sources your installation handles. Below each number; en	ter the monthly generation amount in pounds and frequency code A. 8 or 1					
WASTE [D 1]						
AMOUNT AND SECUENCY 1bs.	lbs. lbs. lbs. lbs.					
C. Connercial Chemical Product Vastes (8 and P Lists). Enter th	e four-digit number from 40 CFR Part 261.33 for each chemical substance					
your installation handles which may be a hazardous waste. Below ea	ch number, enter monthly generation amount in pounds and frequency 4 5.25 1					
WASTE ID #						
AMOUNT AND FREQUENCY 1bs 1	bs. lbs. lbs					
g (Reserved)						
E Characteristics of Monlisted Mazardous Wastes. Mark an 'x' in the boxes corresponding to the characteristics of nonlisted mazardous						
vastes your installation handles. (See 40 CFR Parts 261.21 - 261.24) Below each box that you check, enter the wonthly generation amount expressed in bounds and generation frequency code A. B. or C.						
1. [gnitable (0001)	2. Corrosive 3. Reactive (D003)					
PEQUENCY 1bs.	lhs lhs.					
	er which identifies each characteristic toxic waste Below					
each number enter the mon	thly generation amount and frequency.					
PPEDDENCE The The	lbs. lbs.					
MISSOURI REC	UIRED INFORMATION					
mD Genératir ID Number						
Principle Business Activity						
10.0. Gode Heave blank if uncertain)						
this box if you generate/accumulate less than a regulated quantity						
XI. Certification						
information. I believe that the submitted information is	true, accurate, and complete. I am aware that there it?					
significant penalties for submitting false information, i						
Mane And MARK	Official Title (Type Or Print) Ruhl propuction Supry. 5/16/88					
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